

104-Rec'd PCT/ITC SEP 28 2001

**DECLARATION AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration  
Submitted  
with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (c))  
required)

Attorney Docket Number 20332P

First Named Inventor Liu, et al.

**COMPLETE IF KNOWN**

Application Number 09/831,580

Filing Date May 11, 2001

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

G PROTEIN-COUPLED RECEPTOR RESEMBLING THE LEUKOTRIENE B4 RECEPTOR

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 05/11/2001 as United States Application Number or PCT International

Application Number 09/831,580 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Attorney Docket Number | Priority Claimed?                   |                          |
|-------------------------------------|---------|----------------------------------|------------------------|-------------------------------------|--------------------------|
| PCT/US99/26303                      | PCT     | 11/08/1999                       | 20332-PCT              | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  |                        | <input type="checkbox"/>            | <input type="checkbox"/> |
|                                     |         |                                  |                        | <input type="checkbox"/>            | <input type="checkbox"/> |
|                                     |         |                                  |                        | <input type="checkbox"/>            | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | Attorney Docket Number |
|-----------------------|--------------------------|------------------------|
|-----------------------|--------------------------|------------------------|

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SEP 26 2001

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|--|---------|-------------------------------------|------------------------|-------------------------------------|--------------------------|
|  |         |                                     |                        | YES                                 | NO                       |
| PCT/US99/26303                         | PCT     | 11/08/1999                          | 20332-PCT              | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|  |         |                                     |                        | <input type="checkbox"/>            | <input type="checkbox"/> |
|  |         |                                     |                        | <input type="checkbox"/>            | <input type="checkbox"/> |
|  |         |                                     |                        | <input type="checkbox"/>            | <input type="checkbox"/> |

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**DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application or PCT Parent Application Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--|---------------------------------|--------------------------------------|
| 60/108,111   | 11/12/1998                      |                                      |
| PCT/US99/26303   | 11/08/1999                      |                                      |
|  |                                 |                                      |
|  |                                 |                                      |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorneys or agents with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number  OR  
☒ Registered practitioner(s) name/registration number listed below

Place Customer Number  
Bar Code Label here

| Name              | Registration Number | Name            | Registration Number |
|-------------------|---------------------|-----------------|---------------------|
| Joseph A. Coppola | 38,413              | Jack L. Tribble | 32,633              |
|                   |                     |                 |                     |
|                   |                     |                 |                     |
|                   |                     |                 |                     |

Direct all correspondence to: ☒ Customer Number or Bar Code Label

000210

|                |                                       |                  |               |            |               |
|----------------|---------------------------------------|------------------|---------------|------------|---------------|
| <b>Name</b>    | Joseph A. Coppola                     |                  |               |            |               |
| <b>Address</b> | Merck & Co., Inc. - Patent Department |                  |               |            |               |
| <b>Address</b> | P.O. Box 2000, RY60-30                |                  |               |            |               |
| <b>City</b>    | Rahway                                | <b>State</b>     | NJ            | <b>ZIP</b> | 07065-0907    |
| <b>Country</b> | USA                                   | <b>Telephone</b> | (732)594-6734 | <b>Fax</b> | (732)594-4720 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:**

☐ A petition has been filed for this unsigned inventor

|   |  |                               |  |
|---|--|-------------------------------|--|
| <b>Given Name (first and middle [if any])</b> |  | <b>Family Name or Surname</b> |  |
| QINGYUN                                       |  | LIU                           |  |
| <b>Inventor's Signature</b>                   |  | <b>Date</b>                   |  |
| <b>Residence:</b>                             |  | <b>State:</b>                 |  |
|   |  | <b>Country:</b>               |  |
|   |  | <b>Citizenship:</b>           |  |

ADDRESS

**City**

Rahway

**State**

**ZIP**

07065-0907

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB 02A attached hereto

## DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

SEP 2 3 2001

|  |                 |   |    |                        |            |                   |    |
|--|-----------------|---|----|------------------------|------------|-------------------|----|
| Name of Additional Joint Inventor, if any: |                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor |    |                        |            |                   |    |
| Given Name (first and middle [if any])     |                 |   |    | Family Name or Surname |            |                   |    |
| RUIPING                                    |                 |   |    | WANG                   |            |                   |    |
| Inventor's Signature                       |                 |   |    |                        |            | Date              |    |
| Residence: City                            | Maple Glen      | State   | PA | Country                | US         | Citizenship       | CN |
| Post Office Address                        |                 | Merck & Co., Inc., P.O. Box 2000  |    |                        |            |                   |    |
| City                                       | Rahway          | State   | NJ | ZIP                    | 07065-0907 |                   |    |
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| Given Name (first and middle [if any])     |                 |   |    | Family Name or Surname |            |                   |    |
| WENDY J.                                   |                 |   |    | BAILEY                 |            |                   |    |
| Inventor's Signature                       |                 |   |    |                        |            | Date              |    |
| Residence: City                            | Fort Washington | State   | PA | Country                | US         | Citizenship       | US |
| Post Office Address                        |                 | MICHAEL   |    |                        |            |                   |    |
| City                                       | Rahway          | State   | NJ | ZIP                    | 07065-0907 |                   |    |
| Name of Additional Joint Inventor, if any: |                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor |    |                        |            |                   |    |
| Given Name (first and middle [if any])     |                 |   |    | Family Name or Surname |            |                   |    |
| MICHAEL                                    |                 |   |    | DAVIDOFF               |            |                   |    |
| Inventor's Signature                       |                 | <i>Michael Davidoff</i>   |    |                        |            | Date<br>8/29/2001 |    |
| Residence: City                            | Minneapolis     | State   | MN | Country                | US         | Citizenship       | US |
| Post Office Address                        |                 | Merck & Co., Inc., P.O. Box 2000  |    |                        |            |                   |    |
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|  |                 |   |    |                        |            |                   |    |
| Inventor's Signature                       |                 |   |    |                        |            | Date              |    |
| Residence: City                            |                 | State   |    | Country                |            | Citizenship       |    |

Christine Recchia  
Notary Public State of New York  
No. 01RE601017

2001 08 29 7-13-2001  
Christine Recchia

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| PCT/US99/26303<br>SEP 25 2001                            | 11/08/1999                      |                                      |
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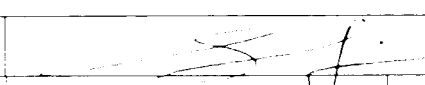
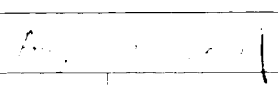
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POST OFFICE

ADDRESS

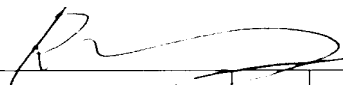
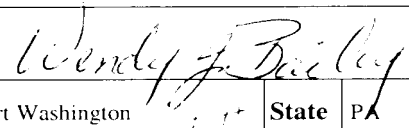
**City** Rahway **State** NJ **ZIP** 07065-0907

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| RUIPING                                    |   |   |    | WANG                   |            |             |              |
| Inventor's Signature                       |  |   |    |                        |            | Date        | Aug 13, 2001 |
| Residence: City                            | Maple Glen  | State   | PA | Country                | US         | Citizenship | CN           |
| Post Office Address                        | Merck & Co., Inc., P.O. Box 2000  |   |    |                        |            |             |              |
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